

STATE OF COLORADO
Department of State

1700 Broadway, Suite 270
Denver, CO 80290



Gigi Dennis
Secretary of State

Holly Lowder
Director, Elections

Attn: Dorothy McCaslin
County Clerk and Recorder

COUNTY: PROWERS

Pursuant to Section 1-7-514 C.R.S. and Election Rule 11, the following election devices have been selected for Random Audit for the 2006 Primary Election.. Please follow the instructions in Rule 11 to determine the method for conducting the post-election audit. Additional help is available on our web site, or you can contact John Gardner at (303) 860-6971 for additional information.

The following table lists the EQUIPMENT that has been randomly selected for auditing:

<u>Make/Model</u>	<u>Type</u>	<u>Use:</u>	<u>Serial #</u>	<u>Race Name to Audit:</u>	<u>Machine Count:</u>	<u>Manual/Hand Count:</u>	<u>Canvass Board</u> <u>Initials</u>
Eslate	DRE	Poll Place	A094DB	Rep. County Sherrif - Faull	43	43	JM, LD
Eslate	DRE	Poll Place	A094DB	Rep. State Board of Education Dist. 4 - Schaffer	45	45	JM, LD
Eslate	DRE	Poll Place	A094DB	Rep. County Sherrif - Arambel	12	12	JM, LD
Escan	Scanner	Absentee Central Count	G786C5	Rep. County Assessor - Wyatt	10	10	JM, LD
Escan	Scanner	Absentee Central Count	G786C5	Dem. State Senate Dist. 1 - Bowen	15	15	JM, LD

NOTE: If the RACES selected were not counted on that device or do not appear in the central count ballot selection, the Canvass board shall audit "Republican for State Treasurer" or "Democrat for Attorney General" in place of the missing races. Please mark the form appropriately. If the MACHINES selected were not used in the election, please contact JOHN GARDNER (303) 860-6971 as soon as possible.

Please complete the highlighted fields in the attached table and fax, or e-mail the form back to the Secretary of State at: voting.systems@sos.state.co.us. This form must be returned no later than: 5:00pm August 21, 2006.

For Internal Use Only	E-mailed by (name): _____	Faxed by (name): _____
	Email Date and Time: _____	Faxed Date and Time: _____
	Email Address: _____	Fax Number: _____
Phone Number: _____	(Attach copy of E-mail)	(Attach copy of fax confirmation)